

State of Colorado
Energy & Carbon Management Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

OGCC RECEPTION

Receive Date:

10/27/2023

Document Number:

403575200

FIELD OPERATIONS NOTICE

The Form 42 shall be submitted as required by Rule, Notice to Operators, Policy, or Condition of Approval.
A Form 42 Update shall be submitted to revise the scheduled date or time on a previous Form 42 - Advance Notice of Field Operations.
A Form 42 Update must be for the same well, location, or facility and for the same Field Operation as a previous Form 42.
NOTE: Operator's Contact for Advance Notices of Field Operations should be available 24 hours a day, 7 days a week and should have the most current scheduling information for the operation. Operator's Contact for other notices should be able to respond to questions regarding the reported information.

Update of a previous Form 42 Notice NO

Entity Information

OGCC Operator Number: <u>10633</u>	Contact Person: <u>Trey Sloan</u>
Company Name: <u>CRESTONE PEAK RESOURCES OPERATING LLC</u>	Phone: <u>(303) 312-8742</u>
Address: <u>555 17TH STREET SUITE 3700</u>	Fax: <u>()</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>tsloan@civiresources.com</u>

API #: <u>05 - 013 - 06545 - 00</u>	Facility ID: <u>290680</u>	Location ID: <u>321478</u>
Facility Name: <u>HARSCH 34-27</u>	<input type="checkbox"/> Submit By Other Operator	
Sec: <u>27</u> Twp: <u>2N</u> Range: <u>69W</u> QtrQtr: <u>SWSE</u>	Lat: <u>40.104226</u>	Long: <u>-105.100467</u>

NOTICE OF RETURN TO SERVICE

Check the appropriate Box Below.

Well

☒ The well will be returned to production on this date: 10/30/2023 [See Rules 417.b.(4) and 417.c.(4)]

OR

☐ The well will be returned to injection on this date: _____ [See Rules 417.b.(4) and 417.c.(4)]

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct and complete.

Print Name: <u>Stephany Olsen</u>	Email: <u>regulatory@civiresources.com</u>
Signature: _____	Title: <u>Sr. Regulatory Analyst</u> Date: <u>10/27/2023</u>

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